

BEFORE THE ARIZONA MEDICAL BOARD

In the Matter of

RAUL M. WEBSTER, M.D.

Holder of License No. 32815
For the Practice of Allopathic Medicine
In the State of Arizona

Case No. MD-07-0518A

**CONSENT AGREEMENT FOR
LETTER OF REPRIMAND**

CONSENT AGREEMENT

By mutual agreement and understanding, between the Arizona Medical Board ("Board") and Raul M. Webster, M.D. ("Respondent"), the parties agreed to the following disposition of this matter.

1. Respondent has read and understands this Consent Agreement and the stipulated Findings of Fact, Conclusions of Law and Order ("Consent Agreement"). Respondent acknowledges that he has the right to consult with legal counsel regarding this matter.

2. By entering into this Consent Agreement, Respondent voluntarily relinquishes any rights to a hearing or judicial review in state or federal court on the matters alleged, or to challenge this Consent Agreement in its entirety as issued by the Board, and waives any other cause of action related thereto or arising from said Consent Agreement.

3. This Consent Agreement is not effective until approved by the Board and signed by its Executive Director.

4. The Board may adopt this Consent Agreement or any part thereof. This Consent Agreement, or any part thereof, may be considered in any future disciplinary action against Respondent.

5. This Consent Agreement does not constitute a dismissal or resolution of other matters currently pending before the Board, if any, and does not constitute any waiver,

1 express or implied, of the Board's statutory authority or jurisdiction regarding any other
2 pending or future investigation, action or proceeding. The acceptance of this Consent
3 Agreement does not preclude any other agency, subdivision or officer of this State from
4 instituting other civil or criminal proceedings with respect to the conduct that is the subject
5 of this Consent Agreement.

6 6. All admissions made by Respondent are solely for final disposition of this
7 matter and any subsequent related administrative proceedings or civil litigation involving
8 the Board and Respondent. Therefore, said admissions by Respondent are not intended
9 or made for any other use, such as in the context of another state or federal government
10 regulatory agency proceeding, civil or criminal court proceeding, in the State of Arizona or
11 any other state or federal court.

12 7. Upon signing this agreement, and returning this document (or a copy thereof) to
13 the Board's Executive Director, Respondent may not revoke the acceptance of the
14 Consent Agreement. Respondent may not make any modifications to the document. Any
15 modifications to this original document are ineffective and void unless mutually approved
16 by the parties.

17 8. If the Board does not adopt this Consent Agreement, Respondent will not
18 assert as a defense that the Board's consideration of this Consent Agreement constitutes
19 bias, prejudice, prejudgment or other similar defense.

20 9. This Consent Agreement, once approved and signed, is a public record that will
21 be publicly disseminated as a formal action of the Board and will be reported to the
22 National Practitioner Data Bank and to the Arizona Medical Board's website.

23 10. If any part of the Consent Agreement is later declared void or otherwise
24 unenforceable, the remainder of the Consent Agreement in its entirety shall remain in force
25 and effect.

1 11. Any violation of this Consent Agreement constitutes unprofessional conduct
2 and may result in disciplinary action. A.R.S. § § 32-1401(27)(r) ("[v]iolating a formal order,
3 probation, consent agreement or stipulation issued or entered into by the board or its
4 executive director under this chapter") and 32-1451.

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6
7 Raul Webster

8 RAUL M. WEBSTER, M.D.

DATED: 4/30/08

FINDINGS OF FACT

1. The Board is the duly constituted authority for the regulation and control of the practice of allopathic medicine in the State of Arizona.

2. Respondent is the holder of license number 32815 for the practice of allopathic medicine in the State of Arizona.

3. The Board initiated case number MD-07-0518A after receiving a complaint regarding Respondent's care and treatment of a fifty-five year-old female patient ("SY").

4. On April 4, 2006, Respondent performed a transvaginal sling procedure for stress urinary incontinence. Post operatively, SY complained of pain, vaginal bleeding and urinary incontinence that she felt was more than what was expected. The following day, SY called Respondent's office complaining of skin irritation and cramps and Respondent prescribed Flexeril.

5. On May 18, 2006, SY saw Respondent for a follow up visit complaining of severe and sharp pain and urinary incontinence. Respondent did not perform a pelvic examination and reassured SY that her symptoms were part of the healing process. There was no documentation of SY's complaints from this follow up visit.

6. On May 24, 2006, SY saw an urologist complaining about her post operative treatment. The urologist performed a physical examination that revealed a vaginal sling erosion. On May 26, 2006, SY underwent surgery to repair the sling erosion.

7. The standard of care requires a physician to perform a physical or pelvic examination post transvaginal procedure to rule out infection, erosion, or hyper suspension when the patient has significant complaints six weeks following surgery.

8. Respondent deviated from the standard of care because he did not perform a pelvic examination on SY to rule out vaginal sling erosion following significant complaints six weeks after the transvaginal procedure.

1 9. Respondent's failure to perform a post operative vaginal examination on SY
2 led to a delay in diagnosing a vaginal sling erosion or a misplaced sling during surgery in
3 an intra-vaginal position that resulted in post operative morbidity. This complication
4 resulted in another surgery subjecting SY to another anesthetic and additional time and
5 money. Sling erosion into the vagina is an infection and Respondent's failure could have
6 led to chronic sling infection from the original vaginal erosion and a risk of future infections.

7 10. A physician is required to maintain adequate legible medical records
8 containing, at a minimum, sufficient information to identify the patient, support the
9 diagnosis, justify the treatment, accurately document the results, indicate advice and
10 cautionary warnings provided to the patient and provide sufficient information for another
11 practitioner to assume continuity of the patient's care at any point in the course of
12 treatment. A.R.S. § 32-1401(2). Respondent's records were inadequate because there
13 was no documentation of SY's complaints from the follow up visit.

14 **CONCLUSIONS OF LAW**

15 1. The Board possesses jurisdiction over the subject matter hereof and over
16 Respondent.

17 2. The conduct and circumstances described above constitute unprofessional
18 conduct pursuant to A.R.S. § 32-1401 (27)(e) ("[f]ailing or refusing to maintain adequate
19 records on a patient.") and A.R.S. § 32-1401(27)(q) ("[a]ny conduct or practice that is or
20 might be harmful or dangerous to the health of the patient or the public.").

21 **ORDER**

22 IT IS HEREBY ORDERED THAT:

23 1. Respondent is issued a Letter of Reprimand for failure to perform a post
24 operative vaginal examination on a patient with continued symptoms and complaints of
25 pain and for failure to maintain adequate records.

1 2. This Order is the final disposition of case number MD-07-0518A.

2 DATED AND EFFECTIVE this 5th day of JUNE, 2008.



ARIZONA MEDICAL BOARD

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By 

Lisa S. Wynn
Executive Director

ORIGINAL of the foregoing filed
this 5th day of JUNE, 2008 with:

Arizona Medical Board
9545 E. Doubletree Ranch Road
Scottsdale, AZ 85258

EXECUTED COPY of the foregoing mailed
this 5th day of JUNE, 2008 to:

Raul M. Webster, M.D.
Address of Record

15 
16 Investigational Review